

POSITION	ID NO.	DATE
CLASSIFIER	5	11-14-94
EXAMINER	341	11-28-94
TYPIST	359	12-13-94
VERIFIER	342	12-14-94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	1-23-93
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37	
38	
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41	✓ =
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓ =

SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Cancelled
- Restricted
- ⊕ Non-elected
- ⊖ Interference
- ↗ Appeal
- ⊖ Objected

Claim	Date
Final	
Original	
51	✓ =
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54	✓
55	✓ =
56	✓ =
57	✓ =
58	✓ =
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(LEFT INSIDE)